BEST AVAILABLE COPY

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													<u> </u>
	PATENT A	APPLICATIO Effect)	Application or Docket Number TEO-015									
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALI TYPE	EN		OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			24					RAT	E	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMB	UMBER EXTRA		BASIC FEE		355.00	OR	Basic Fee	710.00
TOTAL CHARGEABLE CLAIMS			24 minus 20=		•	4		X\$ 9=		36	OR	X\$18=	
INDEPENDENT CLAIMS			ominus 3 =		·	/ ×		X40	=	40	OR	X80=	
M	LTIPLE DEPEN	IDENT CLAIM PI	RESENT				113				OR	+270=	
* If the difference in column 1 is less than zero, enter *0* in column 2						1	TOTAL 43/		OR	TOTAL			
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY					
AMENOMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 24	Minus	••		- 4		X\$ 9	=	•	OR	X\$18=	
	Independent	· + f'_	Minus	***	201044	• (X40:	-		OR	X80=	·
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	+135	•		OR	+270=	
					. ·			TOTAL ADDIT. FEE		OR ADDIT, FEE			
(Column 1) (Column 2) (Column 3)													
AMENDMENT B	,	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER	PRESENT EXTRA		RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	·21	Minus	:2	Y	•		X\$ 9	-		OR	X\$18=	•
	Independent	• 4	Minus	••• 7	<u> </u>	= ~	X40				OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+135			OR	+270=	
								TOT ADDIT. F	AL FE		OR	TOTAL ADDIT, FEE	
		<u>.</u>	,			- '	·						
IENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		PIGH NUM PREVE PAID	BER CUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	•	Minus	••		2		X\$ 9:			OR	X\$18=	
	Independent	•	Minus	***		- '	i i		7				

* If the entry in column 1 is tess than the entry in column 2, write "0" in column 3.

**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20.

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "35"

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

OR

OR

+270=

TOTAL OR ADDIT. FEE

+135=